

PARK VIEW HOME
220 LOCKWOOD ST

WOODVILLE 54028 Phone: (715) 698-2451

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 56

Total Licensed Bed Capacity (12/31/04): 56

Number of Residents on 12/31/04: 52

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 54

Non-Profit Corporation

Skilled

No

Yes

Yes

54

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		17.3
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		44.2
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.9	More Than 4 Years		38.5
Day Services	No	Mental Illness (Org./Psy)	19.2	65 - 74	15.4			-----
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	30.8			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	42.3	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.6	Full-Time Equivalent		
Congregate Meals	Yes	Cancer	1.9		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.9		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	42.3	65 & Over	98.1	-----		
Transportation	No	Cerebrovascular	17.3		-----	RNs		9.1
Referral Service	No	Diabetes	5.8	Gender	%	LPNs		7.7
Other Services	No	Respiratory	1.9		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	9.6	Male	38.5	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	61.5	43.3		
Provide Day Programming for		100.0	-----		-----	-----		
Developmentally Disabled	No				100.0	-----		

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	3	100.0	328	4	12.5	128	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	7	13.5
Skilled Care	0	0.0	0	27	84.4	109	0	0.0	0	15	88.2	135	0	0.0	0	0	0.0	42	80.8
Intermediate	---	---	---	1	3.1	91	0	0.0	0	2	11.8	125	0	0.0	0	0	0.0	3	5.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	3	100.0		32	100.0		0	0.0		17	100.0		0	0.0		0	0.0	52	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	25.6	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	5.1	Bathing	0.0	73.1	26.9	52
Other Nursing Homes	5.1	Dressing	5.8	71.2	23.1	52
Acute Care Hospitals	64.1	Transferring	28.8	44.2	26.9	52
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	21.2	44.2	34.6	52
Rehabilitation Hospitals	0.0	Eating	63.5	25.0	11.5	52
Other Locations	0.0	*****				
Total Number of Admissions	39	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	11.5	Receiving Respiratory Care	7.7	
Private Home/No Home Health	34.1	Occ/Freq. Incontinent of Bladder	63.5	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	9.8	Occ/Freq. Incontinent of Bowel	28.8	Receiving Suctioning	0.0	
Other Nursing Homes	9.8			Receiving Ostomy Care	1.9	
Acute Care Hospitals	22.0	Mobility		Receiving Tube Feeding	0.0	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	5.8	Receiving Mechanically Altered Diets	59.6	
Rehabilitation Hospitals	0.0					
Other Locations	4.9	Skin Care		Other Resident Characteristics		
Deaths	19.5	With Pressure Sores	11.5	Have Advance Directives	92.3	
Total Number of Discharges		With Rashes	3.8	Medications		
(Including Deaths)	41			Receiving Psychoactive Drugs	67.3	

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 50-99 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.4	92.7	1.04	89.0	1.08	90.5	1.07	88.8	1.09
Current Residents from In-County	69.2	84.6	0.82	81.8	0.85	82.4	0.84	77.4	0.89
Admissions from In-County, Still Residing	20.5	20.5	1.00	19.0	1.08	20.0	1.03	19.4	1.06
Admissions/Average Daily Census	72.2	153.0	0.47	161.4	0.45	156.2	0.46	146.5	0.49
Discharges/Average Daily Census	75.9	153.6	0.49	163.4	0.46	158.4	0.48	148.0	0.51
Discharges To Private Residence/Average Daily Census	33.3	74.7	0.45	78.6	0.42	72.4	0.46	66.9	0.50
Residents Receiving Skilled Care	94.2	96.9	0.97	95.5	0.99	94.7	1.00	89.9	1.05
Residents Aged 65 and Older	98.1	96.0	1.02	93.7	1.05	91.8	1.07	87.9	1.12
Title 19 (Medicaid) Funded Residents	61.5	54.6	1.13	60.6	1.02	62.7	0.98	66.1	0.93
Private Pay Funded Residents	32.7	32.6	1.00	26.1	1.25	23.3	1.41	20.6	1.59
Developmentally Disabled Residents	0.0	0.5	0.00	1.0	0.00	1.1	0.00	6.0	0.00
Mentally Ill Residents	19.2	37.4	0.51	34.4	0.56	37.3	0.52	33.6	0.57
General Medical Service Residents	9.6	20.2	0.48	22.5	0.43	20.4	0.47	21.1	0.46
Impaired ADL (Mean)	51.2	50.1	1.02	48.3	1.06	48.8	1.05	49.4	1.04
Psychological Problems	67.3	58.4	1.15	60.5	1.11	59.4	1.13	57.7	1.17
Nursing Care Required (Mean)	10.6	7.0	1.52	6.8	1.55	6.9	1.54	7.4	1.42